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OFFICIAL Atty Docket No. 020824-000910US

PTO FAX NO.: 703-872-9306

ATTENTION: Examiner Daniel St. Cyr
TELEPHONE NO.: 703-305-2656

Group Art Unit 2876

OFFICIAL COMMUNICATION

FOR THE PERSONAL ATTENTION OF

EXAMINER Daniel St. Cyr

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in Application No. 10/024,959, filed December 18, 2001 for VOTING APPARATUS AND METHOD are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Document(s) Attached

1. Transmittal 1 page
2. Fee Transmittal 1 page
3. Petition for a 1-month extension of time 1 page
4. Amendment 7 pages.

Number of pages being transmitted, including this page: 11

Dated: 2/5/04

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San Francisco, CA 94111-3834
Telephone: 415-576-0200
Fax: 415-576-0300

60135696 v1

PTO/SB/21 (08-03)

TRANSMITTAL FORM *(to be used for all correspondence after initial filing)*			
		Application Number	10/024,959
		Filing Date	December 18, 2001
		First Named Inventor	Chandler, Dave
		Art Unit	2876
		Examiner Name	Daniel St. Cyr
Total Number of Pages in This Submission		Attorney Docket Number	020824-000910US

ENCLOSURES *(Check all that apply)*

☒ Fee Transmittal Form	☐ Drawing(s)	☐ After Allowance Communication to Group
☐ Fee Attached	☐ Licensing-related Papers	☐ Appeal Communication to Board of Appeals and Interferences
☒ Amendment/Reply	☐ Petition	☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
☐ After Final	☐ Petition to Convert to a Provisional Application	☐ Proprietary Information
☐ Affidavits/declaration(s)	☐ Power of Attorney, Revocation Change of Correspondence Address	☐ Status Letter
☒ Extension of Time Request	☐ Terminal Disclaimer	☐ Other Enclosure(s) *(please identify below):*
☐ Express Abandonment Request	☐ Request for Refund	
☐ Information Disclosure Statement	☐ CD, Number of CD(s)	
☐ Certified Copy of Priority Document(s)	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
☐ Response to Missing Parts/ Incomplete Application		
☐ Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Patrick R. Jewik Reg. No. 40,456
Signature	
Date	Feb. 5, 2004

CERTIFICATE OF FAX TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9306 on Feb. 5, 2004

Typed or printed name	Patrick Jewik		
Signature		Date	Feb. 5, 2004

60135692 v1

020PTO/SB/17 (10-03)

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT ($) 110

Complete If Known	
Application Number	10/024,959
Filing Date	December 18, 2001
First Named Inventor	Chandler, Dave
Examiner Name	Daniel St. Cyr
Art Unit	2876
Attorney Docket No.	020824-000910US

METHOD OF PAYMENT *(check all that apply)*

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 20-1430

Deposit Account Name: Townsend and Townsend and Crew LLP

The Director is authorized to: *(check all that apply)*

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) ($)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims		Fee from below	Fee Paid
Total Claims		-** =		
Independent Claims		-*** =		
Multiple Dependent				

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	*** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) ($)

**or number previously paid, if greater; For Reissues, see above*

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,330	2453	665	Petition to revive – unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) ($) 110

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Patrick R. Jewik	Registration No. (Attorney/Agent)	40,456	Telephone	415-576-0200
Signature				Date	2/5/04

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